DISTRIBUTION 5 ART A FE FILE U.S.G.5,	REQUEST	OHSURVATION COMMEMON FOR ALLOWABLE AND ASPORT OIL AND NATURAL	Point C-104 Supersedgy Old C-104 and C-116 Effective 1-1-65
TRANSPORTER OIL / GAS OPERATOR			RECEIVED
PROBATION OFFICE Operator		· · · · · · · · · · · · · · · · · · ·	DEC - 7 1978
Address JOE	G. FENNY		0. C. C.
908 West Reason(s) for filing (Check proper be	MAIN Artes	1A NM 882	ARTESIA, OFFICE
New Well	Change in Transporter of:	One present	
Recompletion Change in Ownership	Oil Dry Ga Casinghead Gas Conder	77	
I change of ownership give name and address of previous owner	GeNE A. SNOW	devination	1, MM 88260
DESCRIPTION OF WELL AND	D LEASE Well No. Pool Name, Including F	ormation Kind of Lea	se Lease No.
Platt	2 DAYTON	S.A. State, Foder	al cr Fee
Unit Letter K ; 23	3/0 Feet From The South Lin	e and 2310 Feet From	The 1.185+
21	Cownship 185 Range	DIE NMPM, Fd	di) County
			9
DESIGNATION OF TRANSPORMED OF Authorized Transporter of C	RTER OF OIL AND NATURAL GA	Address (Give address to which appr.	oved copy of this form is to be sent)
NAUAJO Crude Nano oi Authorized Transporter of C	OIL PURCHASING Pasinghead Gas Or Dry Gas	Address (Give address to which appr	oved lopy of this form is to be sent)
TSTN		Is gas actually connected? W	hen
If well produces oil or liquids, give location of tanks.	Unit Soc. Twp. Pge.	NO	NO
f this production is commingled v	with that from any other lease or pool,	give commingling order number:	
COMPLETION DATA Designate Type of Complete	ion - (X)	New Well Workover Deepen	Plug Back Same Resty, Diff, Resty,
Date Spudded	Date Compl. Ready to Pred.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	; Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoo
		A REPURING SECOND	
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	fer recovery of total volume of load of	l and must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)
		Casing Pronsure	Choke Size
Longth of Test	Tubing Pressure		1 21.73
Actual Pred, During Test	Oil-Bhla.	Water - Bbls.	Gun-MCF of
			91
GAS WELL, Actual Frod. Tool-MCF/D	Length of Tool	Bbls. Condensate/MMCF	Gravity of Condensate
Tenting kiethod (pitot, back pr.)	Tubing Pressure (Shut-10)	Casing Pressure (Lhut-in)	Chote Size
CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION
		APPROVED	
hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given above in true and complete to the best of my knowledge and belief.		DY W. a. Gresset	
icate to the sine conficts to t	, "	TITLE SUPERVISOR, DIS	STRICT II
0 ~ 1		This form is to be filed in	compliance with RULE 1104.
(Signatura)		If this is a request for allowable for a newly diffied or despended well, this form must be accompanied by a tabulation of the deviction tests taken on the well in accordance with RULE 111.	
Operat	And it is the content of the state of the st	All pections of this form in	aixt ha filled out completely for allow-
Dec 7. 1978		this on new and recompleted a	II. III, and VI for changes of owner, item to other such change of availables.
	Data)	Matt troubs of figuress! of figures.	·